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2001 COMPOSITE WOOD SURVEY PACKAGE

PROPOSED DUE DATE: JANUARY 1, 2002

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Section 91000 to 91100

(The Air Resources Board's authority to collect

information and the handling of confidential information)

IF YOUR PACKET IS MISSING ANY ITEMS LISTED ABOVE, PLEASE CALL:

Mr. Jim Stebbins (916) 322-2778

Facsimile number (916) 327-5621

E-mail: jstebbin@arb.ca.gov

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INSTRUCTIONS FOR COMPLETING THE 2001 COMPOSITE WOOD SURVEY

The Air Resources Board's (ARB) Composite Wood Survey is intended to collect information about engineered wood products, such as plywood, fiberboard, particleboard, strandboard, etc., and the resins that are used in manufacturing these products in California. You must complete this survey if you are a manufacturer of these products.

If the composite wood manufacturer is not directly involved with the resin formulation of these products, they must identify the designated resin manufacturer who will provide the information necessary to complete the survey on their behalf. The composite wood manufacturer is solely responsible for ensuring that the survey is completed and submitted, to the ARB.

This survey consists of the following questionnaire forms and three attachments:

Company and Product Forms

I: Company Information

II: Product Information

III: Resin Information (Resin Formulator Form)

IV: Process Research and Development

Confidential Information Submittal Form

Attachment A: Definitions

Attachment B: List of Toxic Air Contaminants

Attachment C: Title 17, California Code of Regulations, Section 91000 to 91100

(The Air Resources Board's authority to collect information and

the handling of confidential information)

Please read the instructions before completing this survey.

DRAFT – DO NOT CITE OR QUOTE FORM 1

Company Information – Reporting Year 2000

Company Name:			Web Site:		
Division:					
Address:					
City:	State:		Zip:		
Contact Person:		Title:			
Phone:	FAX:		Email:		
INDEPENDENT OWNERSHIP	·	Company - Gro	Company – Gross Annual Receipts (\$)		
Is your company independently owned?			For Calendar Year 2000 ☐ Less than 500,000 ☐ Between 500,000 and < 1 million		
If No, please provide parent company info	formation below.	☐ Between 1 and < 2 million			
Parent Company Names		☐ Between 2 and < 5 million ☐ Petween 5 and < 10 million			
Parent Company Name:		☐ Between 5 and < 10 million ☐ Between 10 and < 100 million			
Address:		☐ Greater than or equal to 100 million			
City:		Company – California Only Gross Annual Receipts (\$) For Calendar Year 2000			
State: Zip:		□ Less than 500,000			
Contact Person:					
Phone #:		III			
		□ Between 2 ar			
From the list provided below, please ch		☐ Between 5 ar	☐ Between 5 and < 10 million		
products manufactured at your facility	.				
- F1 1 1		☐ Between 10 and < 100 million ☐ Greater than or equal to 100 million			
☐ Fiberboard☐ Hardboard		☐ Greater than	or equal to 100 million		
☐ Hardwood plywood		Company Mark	eting Classification (check all that apply)		
☐ Hardwood veneer		Company Marketing Classification (check all that apply)			
☐ Laminated veneer lumber		□ International			
 Medium density fiberboard 		□ National			
☐ Oriented strandboard		☐ Regional (e.g	g., western U.S.):		
□ Particleboard		California St	atewide		
□ Softwood plywood		☐ California Re	egional (e.g. Bay Area, Southern CA)		
□ Softwood veneer					
□ Wood I-joist					
☐ Other (please specify):					
Note: See attachment for definitions.					

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Sheet # _____of ____

FORM 2 Product Information – Reporting Year 2000

Manufacturer: _____ Product # Product Description (i.e. 34" particle board): Trade Name of Product (if applicable): Total Annual Production (sq. feet): Total Produced in CA (sq. feet): _____ If California manufacturer, what percent of total product do you export? "Typical" Cost per Linear Foot: Resin Manufacturer: _____ Resin Name: _____ Annual Resin Use for the Product: Product # Product Description (i.e. ¾" particle board): Trade Name of Product (if applicable): Total Annual Production (sq. feet): Total Produced in CA (sq. feet): If California manufacturer, what percent of total product do you export? _____ "Typical" Cost per Linear Foot: Resin Manufacturer: _____ Resin Name: _____ Annual Resin Use for the Product:

Confidential: Yes or No

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FORM 3 Resin/Adhesive

Manufacturer:		_	Res	in Name:	_
			Res	in Density (lbs/gal):	-
Resin VOC Specification				Other Organic/Inorganic Compounds	
Ingredient Name	CAS#	TAC	Wt %	Ingredient Name	Wt %
1) 2) 3)					
4) 5) 6)					
7) 8) 9)					
Total VOC ingredients each less than 0.1%	by weight of the produc	t.			
(A) Total VOC Content				(B) Total Other Organic/Inorganic	
Resin LVP-VOC Solvent Speciati	on			Other LVP-VOC	
Ingredient Name	CAS#	TAC	Wt %	Ingredient Name	Wt %
1)					
3)				(D) Total Other LVP-VOC	
4)					
5)					
6) 7)					
8)					
9)					
10)					
Total VOC ingredients each less than 0.1% b	by weight of the product				
(C) Total LVP-VOC Content					
	ו	Γotal of A	, B, C and l	D (MUST EQUAL 100 %)	

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FORM 4 Processes/Research and Development

arch and development efforts do you have regarding alternative processes or resins the maldehyde and other volatile organic compound (VOC) emissions from your <i>finishe</i> .
 ave information regarding emission rates (of any pollutant) from your finished produc
se explain.
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